

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

APPLICATION

FILING DATE

*2/17/06 1/8/07*

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
1	1		1		1		
2		1		1		1	
3		1		1		1	
4		2		2		2	
5		2		2		2	
6		2		2		2	
7		1		1		1	
8		1		1		1	
9		2		2		2	
10		2		2		2	
11		4		4		4	
12		1		1		1	
13		1		1		1	
14		1		1		1	
15		1		1		1	
16		1		1		1	
17		1		1		1	
18		1		1		1	
19		1		1		1	
20	1	1	1	1	1	1	
21		1		1		1	
22							2
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TOTAL IND.	2		2		2		
TOTAL DEP.	31	35	22				
TOTAL CLASSES	33	35	24				